Office of the State Public Defender Human Resource Policies

Subject: Drug-Free Workplace	Policy No.: 531
Title:	Pages: 2
Section:	Last Review Date: 9-26-17
Effective Date: 7-15-10	Revision Date: 11-1-17

1.0 POLICY

The Office of the State Public Defender (OPD) is committed to a drug-free workplace. It is the policy of OPD and the State of Montana that the unlawful manufacture, distribution, dispensing, possession, use or solicitation of a controlled substance by any employee in the workplace is prohibited.

2.0 PROCEDURE

- 2.1 In compliance with the Drug-Free Workplace Act, an employee who is performing work under a covered federal grant will:
 - **2.1.1** Abide by the terms of the state's policy statement requiring a drug-free workplace; and
 - **2.1.2** Notify the agency of any conviction of a criminal drug statute which is the result of a violation which occurred in the workplace. The agency must be notified no later than five days after the conviction.
- **2.2** OPD shall take one of the following actions within 30 days of receiving notice of a conviction from an employee:
 - **2.2.1** Take appropriate action against the employee, up to and including discharge; or
 - 2.2.2 Require such employee to participate satisfactorily in an approved drug abuse assistance or rehabilitation program. Drug counseling and rehabilitation may be covered by the Employee Group Benefits Plan. The State Health Care and Benefits Division should be contacted for further information on specific coverage. The State benefits plan also provides an employee assistance program.
- 2.3 An employee who violates this prohibition is subject to disciplinary action, up to and including discharge, as provided in the Discipline Handling Policy, ARM 2.21.6505 et seq.
- **2.4** Each employee working under a federal grant, as defined in the Drug-Free Workplace Act of 1988, must receive a copy of this policy.

3.0 CLOSING

This policy statement is adopted in compliance with the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D).

Questions about this policy should be directed to the OPD Human Resource Officer at the following address:

Office of the State Public Defender, Central Services Division 44 West Park
Butte, MT 59701
Phone 406-496-6080

ATTACHMENT A

DRUG-FREE WORKPLACE ACKNOWLEDGEMENT FORM

My signature below indicates that I have received a copy of the Drug-Free Workplace Policy explaining the requirements of the act.

I know that I may direct any and all questions about the policy to my supervisor or the Human Resource Officer before signing or at any time in the future.

PRINT NAME:			
Employment Location: indicate below the office str	eet address, city	, state, zip cod	le, and county
Office	_		
Street Address	_		
City, State and Zip Code	_		
County	_		
SIGNATURE:			
DATED:			
This form must be signed and returned to:			

This form must be signed and returned to:
Office of the State Public Defender
Human Resource Office
44 West Park
Butte, MT 59701